
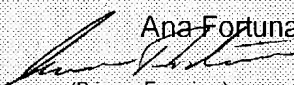


Issue Classification 	Application No.	Applicant(s)	
	09/621,234	HENSHAW ET AL.	
	Examiner	Art Unit	5,783,083
	Ana M Fortuna	1723	

ISSUE CLASSIFICATION											
ORIGINAL				CROSS REFERENCE(S)							
CLASS	SUBCLASS			CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)						
210	636			210	650	321.69	321.8	321.89	257.2	356	500.23
INTERNATIONAL CLASSIFICATION											
B	O	I	D	61//00							
				/							
				/							
				/							
				/							
----- (Assistant Examiner) (Date)				Ana Fortuna  (Primary Examiner) (Date) 2/06/04				Total Claims Allowed: 18			
(Legal Instruments Examiner) (Date)								O.G. Print Claim(s) 13		O.G. Print Fig. 19	

SPE. MCK

<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant										<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
1	①		31		61		91		121		151		181		
2	2		32		62		92		122		152		182		
3	3		33		63		93		123		153		183		
4	4		34		64		94		124		154		184		
5	5		35		65		95		125		155		185		
6	6		36		66		96		126		156		186		
7	7		37		67		97		127		157		187		
8	8		38		68		98		128		158		188		
9	9		39		69		99		129		159		189		
10	10		40		70		100		130		160		190		
11	11		41		71		101		131		161		191		
12	12		42		72		102		132		162		192		
13	⑬		43		73		103		133		163		193		
14	14		44		74		104		134		164		194		
15	⑮		45		75		105		135		165		195		
16	16		46		76		106		136		166		196		
17	17		47		77		107		137		167		197		
18	18		48		78		108		138		168		198		
19	19		49		79		109		139		169		199		
20	20		50		80		110		140		170		200		
21	21		51		81		111		141		171		201		
22	22		52		82		112		142		172		202		
23	23		53		83		113		143		173		203		
24	24		54		84		114		144		174		204		
25	25		55		85		115		145		175		205		
26	26		56		86		116		146		176		206		
27	27		57		87		117		147		177		207		
28	28		58		88		118		148		178		208		
29	29		59		89		119		149		179		209		
30	30		60		90		120		150		180		210		

PATENT NUMBER
5,783,083

U.S. REISSUE Patent Application

O.I.P.E. SCANNED: 12/15/2005 O.A. AA	O.G. PUBLICATION DATE 12/15/2005	REISSUE PATENT DATE
--	-------------------------------------	---------------------

APPLICATION NO. 09/621234	CONT/PRIOR D	CLASS 210	SUBCLASS 11	ART UNIT 1723	EXAMINER Fortuna.
------------------------------	-----------------	--------------	----------------	------------------	----------------------

WANTANTS Wayne Henshaw
Mailvaganam Mahendran
Henry Johnson

Vertical cylindrical skein of hollow fiber membranes and method of maintaining clean fiber surfaces

PTO-2040
12/99[illegible]

<input type="checkbox"/> TERMINAL DISCLAIMER	DRAWINGS			CLAIMS ALLOWED	
	Sheets Drwg. <div style="text-align: center; font-size: 1.5em;">13</div>	Figs. Drwg. <div style="text-align: center; font-size: 1.5em;">3</div>	Print Fig. <div style="text-align: center; font-size: 1.5em;">19</div>	Total Claims <div style="text-align: center; font-size: 1.5em;">18</div>	Print Claim for O.G. <div style="text-align: center; font-size: 1.5em;">13</div>
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner) (Date)			NOTICE OF ALLOWANCE MAILED	
	<input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent. No. _____	<div style="text-align: center;"> ANA FORTUNA PRIMARY EXAMINER (Primary Examiner) (Date) </div>			ISSUE FEE
<input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.		<div style="text-align: center;"> (Supervisor of original Patent) (Date) </div>			Amount Due
FINAL SPRE REVIEW	<div style="text-align: center;"> Supervisor of original Patent 041690,845 </div>			ISSUE BATCH NUMBER	
_____ (INITIALS)	_____ (Legal Instruments Examiner) (Date)				

WARNING:

The information disclosed herein may be restricted. Unauthorized disclosure may be prohibited by the United States Code Title 35, Sections 122, 181 and 368. Processing outside the U.S. Patent & Trademark Office is restricted to authorized employees and contractors only.

Form PTO-2008
(Rev. 6/99)

FILED WITH: ☐ DISK (CRF) ☐ FICHE ☐ CD-ROM
(Attached in pocket on right inside flap)

(FACE)